



BURGH OF KILMARNOCK.

REPORT
OF THE
Medical Officer of Health
FOR THE
YEAR 1953.

KILMARNOCK:
THE KILMARNOCK STANDARD, LTD.
1954.

BURGH OF KILMARNOCK.

REPORT

UPON THE

Health of Kilmarnock

FOR THE

YEAR 1953

BY

BRYCE R. NISBET, M.D., F.R.C.P. (Ed.), D.P.H.

Medical Officer of Health.

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HEALTH AND WELFARE DEPARTMENT,
KILMARNOCK,
AUGUST, 1954.

To the Provost, Magistrates and Councillors of the Burgh of Kilmarnock,
and to the Department of Health for Scotland.

LADIES AND GENTLEMEN,

I have the honour to present the Annual Report on the Health of the Burgh of Kilmarnock for the year 1953.

Again during the year no case of Diphtheria has occurred. It is now over four years since a case of the disease was notified and over eight years since a death occurred from the disease in the town. The infantile mortality rate was the lowest ever recorded. The tuberculosis death rate showed a very slight increase over the previous year, and there were two maternal deaths. The still-birth rate has continued at an unsatisfactory high level.

In the spring of the year, I was granted leave of absence to take up a short term World Health Organisation travelling Fellowship, and proceeded to the United States and Canada to study Public Health administration. The main objects of the visit were to endeavour to obtain information on :—

1. The use of combined antigens.
2. Poliomyelitis.
3. Fluoridation of water supplies.
4. The technique of morbidity surveys.
5. The care of the aged.

A full report on the visit has already been submitted to the members of the Town Council, but this opportunity is taken to express grateful thanks to members of the Council for providing permission and facilities to allow me to benefit by this travel.

By the end of the year proposals were before the Department of Health for the addition of tetanus toxoid to the antigens used in the immunisation campaign. A further report by the Water Engineer and myself on how fluoride could be added to Kilmarnock water was in course of preparation. A proposal was before the Department of Health that all coronary incidents in the burgh would, from the start of 1954, be made voluntarily notifiable to the Health Department by practitioners and hospital authorities alike, in an effort to get an all-over picture of the incidence of coronary disease in a provincial town.

It is again a pleasure to record the ready help received from members of the Council, Officials, medical colleagues and members of the general public during the year. The staff of the Health and Welfare Department have at all times given of their best.

I am, Ladies and Gentlemen,

Your obedient Servant,

BRYCE R. NISBET,

Medical Officer of Health.

BURGH OF KILMARNOCK.

CONSTITUTION OF COMMITTEES AS AT 31st DECEMBER, 1953.

HEALTH COMMITTEE.

Convener—COUNCILLOR G. COLLINS.

Also Convener of General Health Services Sub-Committee.

PROVOST W. B. GILMOUR.

BAILIE J. C. CAMPBELL.

BAILIE I. T. PARKER.

TREASURER H. A. MACKINTOSH.

POLICE-JUDGE D. CAIRNS, *Convener of Cleansing and Slaughterhouse Sub-Committee.*

POLICE-JUDGE MRS. A. GIBSON, *Convener of Cemeteries Sub-Committee.*

COUNCILLORS J. L. BRYSON.

R. H. BANKS.

MRS. F. E. ROME, *Convener of Baths Sub-Committee.*

W. WESTBURY.

J. L. GIBSON.

STAFF.

BRYCE R. NISBET, M.D., F.R.C.P.(Ed.), D.P.H.—*Medical Officer of Health.*

G. FIDES M. BRAID, M.B., CH.B., D.P.H., D.R.C.O.G.—*Assistant Medical Officer of Health.*

HEALTH VISITORS.

MISS M. A. ROBERTSON.

MISS M. A. MCCALLUM.

MISS I. MACKENZIE.

MISS L. K. ROSSA.

MISS J. LAING.

MISS D. MACDONALD.

MUNICIPAL MIDWIVES.

MISS G. W. GIBSON.

MISS E. G. COWAN.

DAY AND RESIDENTIAL NURSERIES.

Matron—MISS J. DOAK.

HOME NURSES.

MISS M. THOMSON.

MISS I. WARNER.

MISS A. SMITH.

MISS M. MACLEOD (Resigned 14/8/53).

MISS C. B. NICOLSON.

MISS M. NICOLSON (Appointed 28/7/53).

DOMESTIC HELP SERVICE.

Supervisor—MISS M. B. BROWN.

CLERICAL STAFF.

MISS E. S. GILLESPIE, *Chief Clerical Assistant.*

MISS J. B. KEDDIE.

MISS M. NEIL.

MISS A. CONNOR (Resigned 15/3/53).

MISS M. BOWIE.

MISS M. S. BRYDEN (Appointed 13/4/53).
(Resigned 21/11/53).

Report of the Medical Officer of Health

FOR THE BURGH OF KILMARNOCK FOR THE YEAR 1953.

SUMMARY OF VITAL STATISTICS, 1953.

Area of the Burgh	3920.7 acres
Population (estimated to middle of 1953)	42,724
Population density	10.9 per acre

	Corrected Numbers.			Rate per 1,000 of Estimated Population.
	Males.	Females.	Total.	
Births (including Illegitimate)	408	369	777	18.2
Births (Illegitimate)	13	8	21	2.7 *
Still-Births	15	12	27	34 **
Deaths—All Causes	252	228	480	11.2 †
Tuberculosis (all forms)	11	2	13	0.30
Tuberculosis (respiratory)	9	1	10	0.23
Principal Epidemic Diseases	2	2	4	0.09
Children under one year	11	9	20	26 ***
Children under one month	8	6	14	15 ***
Maternal Deaths	—	2	2	2.5 **

* Rate per 100 Live Births.

** Rate per 1,000 Births (including Still-births).

*** Rate per 1,000 Births.

† Rate adjusted for Sex and Age Distribution—12.2.

During the year an adjustment of the burgh boundaries took place, 247.8 acres being added in the Bellfield area and 66.5 acres being given back to the County in the region of London Road.

BIRTHS.

The rate for 1953 (18.2) shows for the third year in succession a small increase. It is greater than the figure for Scotland as a whole (17.1), but less than the figure (18.6) for the large burghs.

An analysis of births shows the following :—

	Number.	Percentage.	Percentage for 1949
First Births	268	34.5	37.9
Second Births	225	28.9	30.5
Third Births	126	16.2	12.4
Fourth Births	75	9.7	6.0
Fifth and subsequent Births	75	9.7	11.7
Information not available	8	1.0	1.4

The table which follows gives information as to the ages of the mothers and also the infantile deaths and infantile mortality rates by age groups :—

	<i>Mothers.</i>	<i>Infantile Deaths.</i>	<i>Infantile Mortality Rate.</i>
Under 20 years	27	—	—
20 and under 25 years	198	4	20.2
25 and under 30 years	253	9	35.6
30 and under 35 years	179	5	27.9
35 and under 40 years	72	2	27.7
40 and under 45 years	30	—	—
45 and under 50 years	2	—	—
Unascertained	16	—	—

Illegitimacy.

An examination of the illegitimacy rate from 1900 to the present day for Scotland, reveals that it has remained remarkably steady. There were slight rises in the first war, the early thirties and during the second war, with a tendency to decrease in the early twenties and late thirties, and since the last war it has fallen rapidly to a new low level of 4.7% of all births. The Kilmarnock figures over the same period naturally show rather bigger variations but in the same directions. The present level is 2.7% of all births, and the rates for the town are, by comparison with most other areas, low. Since the turn of the century the town rates have exceeded the rates for the country on 8 occasions only.

It is a generally accepted fact that the rate does increase during wars, and the reasons for the increase are presumed to be the throwing together of unusual groups in circumstances where normal controls are reduced. In other words, the opportunities for a decline in the standard of conduct are increased. It is felt that the kind of circumstances which will contribute to illegitimacy during peace time will not be very much different.

In 1945, 136 cases were analysed and in 1953 a further 194 were investigated as to what happened to the children. The following table gives the findings :—

	1945	1953
Children and their mothers received into the homes of the child's grandparents... ..	56	24
Mothers co-habiting with child's father	18	31
Children subsequently legitimised by marriage of parents	13	7
Children of married women remaining in the household after reconciliation with husband	4	3
Children adopted	5	18
Children received into other households, remaining with mother, or in residential homes	4	17

In 1945 favourable comment was made on the way grandparents had rallied round and faced up to unpleasant circumstances. It was, in our opinion then, a matter for admiration that so many of these mothers and babies were not merely tolerated, but were being accepted into full family life.

In these surveys, and especially the second one, a most impressive and disturbing fact is the large proportion of these people who were living in adultery, or to use our modern euphemism, co-habiting. The number of such cases is one index of the morality of the town, and although so far short of satisfactory there is no reason to believe that Kilmarnock is any worse than most other places.

It is very difficult to decide in many cases what is best for the mother and child. Locally it has always been held as a guiding principle, that it is well to remember that the mother has a right to keep her child, if she wishes, and often that is the best solution in the long run. Sometimes a rather too ready decision to have a child adopted has reacted in later years to the detriment of the mother. On the other hand there are circumstances when adoption seems to be the only course.

The age comparison of mothers of legitimate and illegitimate children is interesting and is set forth below :—

<i>Age.</i>							<i>Legitimate, Illegitimate.</i>	
Under 21 years	...	...	...	...	...	...	8%	22%
Under 26 years	...	...	...	...	...	...	37%	56%
Under 36 years	...	...	...	...	...	...	67%	71%

(It will be noted that the percentages are cumulative).

Another measure of morality is the number of first births which occur, after marriage, within the period of gestation. Excerpts from an examination of records of the town going back approximately 100 years reveals the following :—

							<i>Within period of gestation.</i>	
							<i>Percentages</i>	
							<i>All births.</i>	<i>First Births.</i>
1855	...	...	...	...	...	...	10	50
1900	...	...	...	...	...	...	9	30
1953	...	...	...	...	...	...	6	17

In considering the cases over a long number of years and without going into elaborate mental testing, an appreciable number of unmarried mothers have appeared to fall into the category described as "simple."

In the last 200 cases the rough classification arrived at was as follows :—

Apparently normal intelligence	...	...	...	...	...	...	...	139
"Simple" ...	...	...	...	...	...	...	...	47
Unknown	...	...	...	...	...	...	...	14
Unstable	...	...	...	...	...	...	...	44

(11 of the above were also classified as "simple").

In considering the occupations of those mothers who worked, it became evident that there was some reason to believe that certain occupations carried an increased risk. It would be unwise on account of the smallish numbers to stress this unduly but it should be recorded that the highest rates occurred in those employed in the public transport service and in occupations akin to agriculture.

The parity of the mothers in 191 of the illegitimate births in recent years is indicated in the following table :—

First births	...	...	...	...	...	...	...	116
Second births	...	...	...	...	...	...	...	35
Third births	...	...	...	...	...	...	...	13
Fourth births	...	...	...	...	...	...	...	10
Fifth births	...	...	...	...	...	...	...	7
Sixth births	...	...	...	...	...	...	...	6
Seventh to tenth births	...	...	...	...	...	...	...	4

Of the 75 subsequent illegitimate births, 44 occurred to persons co-habiting.

GENERAL COMMENTS.

In considering what can be done to combat the problem of illegitimacy, one must be guided by the principle that it is only right to accept what has already occurred, and not spend too much time in condemning those unfortunate enough to be in the position of expectant mothers and unmarried. On the other hand, it is important that the pendulum is not allowed to swing too far the other way from the condemnatory attitude of the Victorians, and nothing in the treatment of such cases should give the prospective mother the feeling that she has been unduly clever or done anything of which she need be proud. Such people should be treated with kindness and consideration but without sentimentality.

The most important factor bearing on the problem is a good upbringing and the benefit of living in a good home.

The psychiatrists blame a great deal of abnormal behaviour—probably quite correctly—on the lack of a feeling of security in childhood, and they state that mother love is of first importance. Factors calculated to cause trouble in later life are, for instance, being born illegitimate—sometimes resulting in a long feeling of general antagonism which may last a lifetime—quarrels between parents, infidelity, alcoholism and allied conditions.

Secondly, there is scope for increase in the work sponsored by the Scottish Council for Health Education where they send round their very able woman lecturer to talk to the older school children on sex matters. In addition to this, if the Health Visitor Service were adequate, time would be available for educational work among adolescents.

Thirdly, there should be adequate supervision of young persons by their parents and the latter should have no compromise with questionable developments in so-called freedom.

Fourthly, the influence of press, radio, television, cinema and theatre could all be most important in improving matters if their own standards were more often faultless.

Lastly, it is generally agreed that improved housing is very necessary if the decencies of life are to be respected. The crowding together of young folk in a limited space practically forces them to spend their time elsewhere—in places where they have not the benefit of the background supervision of a good home.

Still-Births.

There were 27 still-births giving a rate of 34 per 1,000 total births (including still-births). This is not a satisfactory rate. It has been increasing for the past 3 years and is greater now than in 1939 when still-births were first registered. The rate for Scotland is 25 and for the large burghs 27.

The main causes this year were :—

<i>Hazards of Birth.</i>	<i>Pre-Existing at Birth.</i>	
Difficult Labour—	Foetal Deformity	7
Torsion of Cord	Antepartum Haemorrhage—	
Prolapse of Cord	Placenta Praevia	—
Malpresentation	Accidental Haemorrhage	4
Pelvic Deformity	Toxaemia	4
Prolonged Labour and Uterine	Chronic Disease of Mother	—
Intertia	Ill Defined—	
Injury at Birth	Debility	—
Other specific causes—	Atelectasis	—
Cord round neck	Macerated Foetus	3
Ill-defined	Prematurity	1
	Erythroblastosis	3
	Unknown	—

INFANTILE MORTALITY.

The rate this year (26) is considerably lower than it has ever been before and is most satisfactory for the town. It is to be compared with a rate of 32 for the country generally and 33 for the large burghs.

The main causes of death were :—

	<i>Neo-Natal</i> (under 1 Month).	<i>Post-Natal</i> (1-12 Months).
Prematurity	8	—
Infections	1	4
Foetal Deformities	3	—
Birth Haemorrhage	1	—
Ill Defined Causes	1	2

The following diagram shows how the rates have altered since the beginning of the century.

	<i>Averages.</i>
1902-1910	113
1911-1920	102
1921-1930	97
1931-1940	83
1941-1950	64
1951-1953	36

The above diagram may be expressed as follows :—

- 1902-1910—1 in every 9 babies died during the first year of life.
 1911-1920—1 in every 10 babies died during the first year of life.
 1921-1930—less than 1 in every 10 babies died during the first year of life.
 1931-1940—1 in every 12 babies died during the first year of life.
 1941-1950—1 in every 15 babies died during the first year of life.
 1951-1953—1 in every 28 babies died during the first year of life.

DEATHS.

480 deaths were registered in 1953, being 10 fewer than in the previous year. The death rate was 11·2 per 1,000 of the population. This figure shows a decrease over the previous year and is to be compared with 11·3 for all Scotland and 10·8 for the large burghs. Only once has the rate for the town been lower—in 1948.

Principal Epidemic Diseases.

Of the four deaths occurring from the principal epidemic diseases, three were in respect of Influenza in persons over the age of 75. The other was an infantile death from a meningococcal infection.

For the eighth year in succession there was not a death from Diphtheria.

Tuberculosis.

There were 10 deaths from pulmonary tuberculosis—an increase of 3 over the previous year. As was the case last year, all but one of these deaths were in males.

Deaths Classified According to System Affected.

	<i>Number.</i>	<i>Average Age at Death.</i>	<i>Age Range.</i>	<i>Total loss of life in Years.*</i>
Diseases of the Circulatory System ...	179	70	29-93	1485
Diseases of the Nervous System ...	96	72	26-88	538
Cancer	71	64	24-84	806
Diseases of the Respiratory System ...	33	57	Infancy to 91	642
Diseases of the Digestive System ...	15	58	Infancy to 89	279
Pulmonary Tuberculosis	10	40	21-74	350
Diseases of the Genito-Urinary System	4	52	27-69	91
Other Causes	72	43	Infancy to 94	2285

(*Loss of life calculated as 75—age at death. C.F. page 8, Annual Report for 1949).

In connection with the causes of death specially investigated for the past few years, *Coronary disease* again far outnumbered the others.

In 1953, 78 deaths were credited to this cause. Particulars are to be seen in the appended table.

	Male.	Female.
Under 40 years	2	1
40-44 years	1	—
45-49 years	2	—
50-54 years	9	—
55-59 years	9	2
60-64 years	5	5
65-69 years	8	9
70-74 years	6	3
75-79 years	4	1
80 years and over	6	5
TOTAL	52	26

This number, 78, is to be compared with 69 for 1952, and an average of 52 over the previous 7 year period. There seems little doubt that there is a real increase in the incidence of the condition. Of late years it has been obvious that the disease incidence in the two sexes is quite different. There has been in these years a high incidence in males under 60, whereas the high incidence in females occurs at a much later age. In an endeavour to increase our knowledge of the condition by early ascertainment, a scheme was submitted to the Department of Health by the Town Council towards the end of the year, for making Coronary disease notifiable by practitioners. The proposed form of notification was as follows :—

NOTIFICATION OF CORONARY INCIDENT.

TO THE MEDICAL OFFICER OF HEALTH,
6 GRANGE STREET, KILMARNOCK.

Name of Patient	...	...	...	...	.....
Address	...	...	...	...	.....
Age	...	...	...	...	.....
Date of Incident	...	...	...	...	.....
Type of incident :—					
Angina :—	effort only				
	effort and rest				
Coronary Artery Thrombosis					
Is this the first attack?	...	...	...	...	.....
If not, date of first attack	...	...	...	...	.....
nature of first attack	...	...	...	...	.....
Signature of practitioner	...	...	...	...	.....
Address	...	...	...	...	.....
Date of notification	...	...	...	...	.....

The scheme was to be entirely voluntary on the part of the practitioners, but preliminary discussions had suggested that participation in the proposal would be welcomed by them.

In the case of *Cancer of the Lung* there were 11 deaths—all males, the ages at death ranging from 52 to 69 years.

Cancer of the Stomach caused 13 deaths, 9 in males and 4 in females—the age range in this case being considerably wider.

Valvular Disease of the Heart caused 5 deaths—two in males and three in females. These deaths occurred between ages 41 and 62.

Tuberculosis caused 13 deaths, 11 in males and 2 in females. All but two of these deaths occurred before the age of 50.

Violence was given as the cause of death in 20 instances. Details are as follows :—

Suicide	...	...	...	...	...	...	...	...	...	1
Motor Vehicle accidents	...	...	...	...	...	...	...	...	...	2
Other violence	...	...	...	...	...	...	...	...	...	17

Amongst the cases of other violence, the main causes were falls resulting in fracture of bones, especially of the femur, burns and poisoning.

In the following table is set forth the figures for certain diseases, for the years 1949, 1950, 1951, 1952 and 1953 for males grouped according to social class, and these have been compared with the figures supplied by the 1951 Census return for males. These years are grouped symmetrically around the census year and it is felt that the figures will be reasonably comparable.

	<i>Classes I and II.</i>	<i>Class III</i>	<i>Classes IV and V.</i>	<i>Number of entries.</i>
Cancer of the Lung	10.8	43.2	45.9	37
Cancer of the Stomach	8.1	48.6	43.2	37
Tuberculosis	16.6	41.8	41.6	36
Coronary Thrombosis	13.5	59.9	26.6	207
Population—males 15 years and over (1951 Census)	20.3	45.5	34.3	14,300

The figures are small and the only ones approaching statistical significance are those in respect of Coronary disease. It is interesting to note the high incidence in the skilled artisan class, i.e. III. It has long been known that Cancer of the Stomach is rare in persons in Classes I and II and this is borne out by the local figures. On the other hand this class difference has not been generally found in Cancer of the Lung, so the local figures are unusual. In connection with Tuberculosis, this disease used to be considered to be very closely related to poverty. With improved social conditions as they exist in the country now, one would expect this association to become gradually reduced, and that is what the local figures suggest.

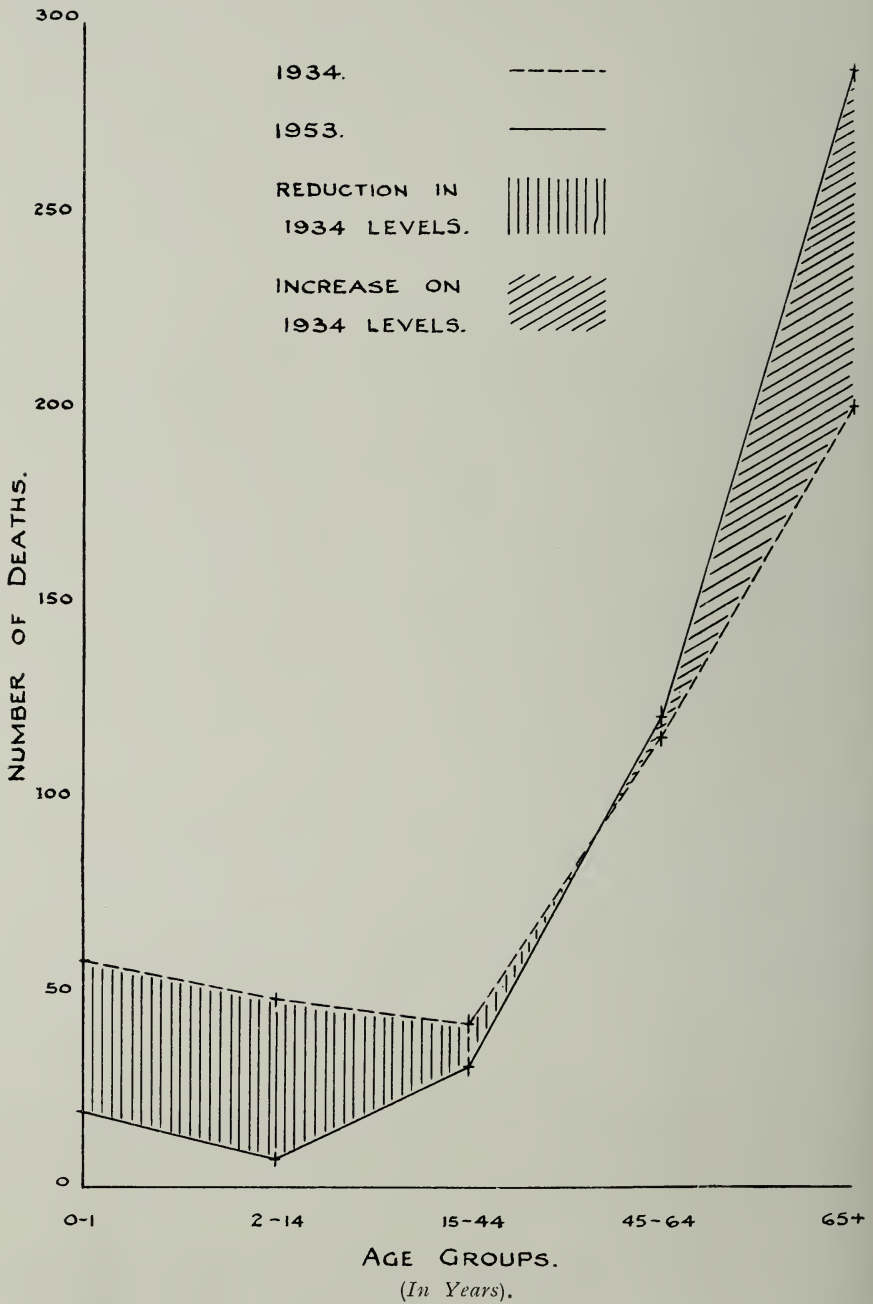
Maternal Deaths.

There were two maternal deaths during the year, neither of which was attributed to infection. The first was considered due to haemorrhage and the second to toxæmia.

General.

It is a well-known fact that more and more people are living to a greater age. The diagram which follows illustrates the differences in age at death that have developed over the past 20 years. In 1934 there were 482 deaths, in 1953 there were 480 deaths, but in the first of these years there were relatively more deaths in the first half of life, whereas in the later year there was a relative excess of deaths in the older age groups.

DEATHS.



GENERAL SICKNESS.

The figures which follow have been supplied to the Health Department by the Ministry of National Insurance and refer to the work of their office in the town, which deals with an area of the County surrounding and including the town. The figures for last year are included, in parenthesis, for comparison :—

Claims for Sickness Benefit.

							<i>Average Number per week.</i>	<i>Difference.</i>
January	...	...	...	...	...	...	228 (230)	- 2
February	...	...	...	...	...	...	287 (240)	+47
March	...	...	...	...	...	...	289 (227)	+62
April	...	...	...	...	...	...	172 (234)	-62
May	...	...	...	...	...	...	165 (149)	+16
June	...	...	...	...	...	...	154 (148)	+ 6
July	...	...	...	...	...	...	139 (124)	+15
August	...	...	...	...	...	...	124 (119)	+ 5
September	...	...	...	...	...	...	162 (183)	-21
October	...	...	...	...	...	...	212 (203)	+ 9
November	...	...	...	...	...	...	235 (218)	+17
December	...	...	...	...	...	...	208 (217)	- 9
Total for year	...	...	...	...	...	...	10,461 (9,887)	+574

There is no indication from the figures as to the causes of sickness.

An analysis of the figures during the past four years i.e. since they became available, by quarters (by the method of the quarterly deviation from the moving average) suggests that in the :—

1st Quarter of any year one can expect about 1,000 more Claims for sickness benefit than the quarterly average for the whole year. In the

2nd Quarter, the expectation is for the claims to be some 300 less than the quarterly average. In the

3rd Quarter (which includes the Fair holiday period), the claims are 900 less than the average, and in the

4th Quarter the claims are in excess of the average to the extent of 200. It is surprising that there is so much difference between this index of sickness in the 1st quarter and in the 4th quarter.

The position can be summed up briefly as follows :—

1st Quarter	...	...	...	...	...	...	...	...	...	+1000
2nd Quarter	...	...	...	...	...	...	...	...	...	- 300
3rd Quarter	...	...	...	...	...	...	...	...	...	- 900
4th Quarter	...	...	...	...	...	...	...	...	...	+ 200

CARE OF MOTHERS AND YOUNG CHILDREN.

(a) EXPECTANT MOTHERS.

The number of women who attended the antenatal clinic in Green Street held each Monday afternoon, again decreased. The trend is only too obvious from a perusal of the following figures :—

							<i>Number of mothers attending.</i>	<i>Total attendances.</i>
1948	...	...	...	...	...	...	185	901
1949	...	...	...	...	...	...	104	598
1950	...	...	...	...	...	...	82	441
1951	...	...	...	...	...	...	53	296
1952	...	...	...	...	...	...	37	332
1953	...	...	...	...	...	...	23	201

It is known that the hospital service insist on patients who have elected to have their babies in hospital attending antenatal clinics at the hospital on at least two occasions. No fault can be found with this arrangement from the point of view of midwifery, but as such a large number (about 90%) of our mothers continue to go to the premises that had been built for them by the local authority and as these premises now belong to another authority, the result is that the health department has not the same early information about pregnancies. Thus full use cannot be made of the antenatal period for health education. Attempts are in process for obtaining earlier information.

(b) CHILD WELFARE.

During the year three child welfare centres operated in the Burgh. Each Monday afternoon a clinic was held in Shortlees in the Riccarton Community Centre. On Tuesday and Thursday afternoons, clinic sessions were held at the Centre in Green Street. On Wednesday afternoons clinics were held at Knockinlaw Community Centre. Co-ordination with the hospital pediatric services is good, the Consulting Pediatrician having the use of the Central Clinic Premises twice a month and the Assistant Medical Officer attending the Children's Hospital at Seafield once a month. The following table sets forth some information about the ages of children attending these clinics.

No. of Clinics Provided.	No. of Children Attending the Clinics who on Date of First Attendance were		Total number of Attendances made by Children who at time of Attendance were	
	Under 1 Year.	Over 1 Year.	Under 1 Year.	Over 1 Year.
3	380	142	706	331

The numbers are becoming reduced slightly as now a greater proportion of those attending come solely for advice—more and more of treatment being undertaken by the family practitioner.

Apart from the clinics at which a doctor is present, each Health Visitor has a session when she meets mothers from her district, weighs the babies and gives general advice. 5714 attendances were made at such sessions.

The following is an analysis of the feeding particulars of 662 babies at the age of 3 months :—

Breast fed	...	...	...	...	...	...	...	...	...	21%
Partially Breast fed	...	...	...	...	...	...	...	...	...	7%
Artificially fed	...	...	...	...	...	...	...	...	...	72%

The examination of similar figures over the past 12 years shows :—

1. that the figures for partially breast-fed babies has remained at about 10%
2. that the figures for breast-fed babies have fallen gradually from about 60% to 21%.
3. that the figures for artificial feeding have risen from about 30% to 72%.

The thanks of the Department are due to Mrs. John D. Crooks, S.R.N., C.M.B., for the unstinting service she has rendered as a voluntary helper at the Clinics during the year.

(c) CARE OF PREMATURE INFANTS.

Arrangements for the care of such babies have remained unaltered during the year. Since 89% of the births occur in hospital, provision is already at hand for attention to most premature babies. Two of the babies (twins) born in the district were conveyed during the year to the local Maternity Hospital, where they remained for 33 and 62 days respectively. One other premature baby was admitted to the Maternity Section at Irvine but died next day.

(d) SUPPLY OF DRIED MILKS, ETC.

During the year most of these milks, vitamins and allied preparations were distributed from the Food Office in Morton Place. A certain amount continued to be given out at the Riccarton Community Centre—for the convenience of those mothers resident in the Southern part of the town. Particulars of distribution as supplied by the Food Section of the Ministry of Labour and National Service are appended :—

		<i>National Dried Milk (Tins).</i>	<i>Cod Liver Oil (Bottles).</i>	<i>Vitamin Tablets (Packets).</i>	<i>Orange Juice (Bottles).</i>
Kilmarnock (Food Office)	28,828	35,500	2,208	27,239	
Riccarton Clinic	2,103	571	88	1,579	

(e) DENTAL CARE.

Early in the year a scheme was approved by the local authority for the commencement of a part-time (two sessions per week) service for mothers and young children based on the use part-time of a dentist in the school service. Unfortunately the scheme did not come into operation because of the fact that the school dental officers were fully employed in county council work. Further discussions took place during the year but no effective progress was made.

(f) OTHER PROVISION.

The following table sets forth information about the three local authority nurseries :—

	<i>No. of Approved Places.</i>		<i>No. of Children on Register at end of year.</i>		<i>Average daily attendance during year.</i>		<i>Waiting lists at end of year.</i>	
	0-2	2-5	0-2	2-5	0-2	2-5	0-2	2-5
Hillbank Nursery, Hill Street	15	25	10	26	10	21	2	2
Flowerbank Nursery, Portland Road	18	25	17	27	14	24	2	1
Glebe Nursery, Glebe Road	15	25	4	22	9	22	—	—
	48	75	31	75	33	67	4	3

The mothers' clubs attached to each nursery have functioned usefully during the year. They meet on an average once a week and a lecture or demonstration is arranged on each occasion.

DOMICILIARY MIDWIFERY.

1063 live births and 23 still-births, making a total of 1086, occurred in the Burgh during the year. Of this number 1000 occurred in the Kilmarnock Maternity Hospital and 86 at home.

The two Municipal Midwives attended all the 86 domiciliary births. They participated in the training of midwives for Part II of the State Certificate. The fact of their being resident in the local Maternity Hospital greatly assisted this work and made for the closest co-ordination with the hospital side of the service.

54 patients received gas and air anaesthesia and 63 received pethidine.

A doctor was present at some period of the confinement on six occasions.

Much of the work of the Municipal Midwives was taken up by antenatal care. One of the midwives attends the weekly session of the municipal antenatal clinic and one attends the weekly session held in the surgery premises of a firm of private practitioners.

Notification of Births Act.

The duty of notifying a birth is placed on the parents, medical attendant and midwife, and notification must be made within 36 hours of the occurrence of the birth. Only one of the above need notify, and the others need not if they have reason to believe that a notification has already been sent.

During 1953 one birth failed to be notified until attention was drawn to the fact.

The total number of notified births, including still-births, was 1086, being 61 more than last year.

86 or 7.9% of these occurred in the patients' own homes. 1000 or 92.1% occurred in the Maternity Home.

			<i>Male.</i>	<i>Female.</i>	<i>Total.</i>
(a)	Number of Births registered (including still-births)	Legitimate...	530	503	1033
		Illegitimate	16	9	25
(b)	Number of births notified	live-births ...	...	...	1063
		still-births ...	...	...	23
(c)	Number attended by Doctor	...	...	...	174
	Number attended by Midwives	...	...	...	888
	Number attended by Doctors and Midwives	...	...	...	24

Details of the work of the Health Visitors are set forth in the following table:—

<i>Expectant Mothers</i>		<i>Children under 1 year of age</i>		<i>Children between the ages of 1 and 5</i>		<i>Tuberculosis Cases</i>		<i>Other Cases</i>		<i>School Visits</i>		<i>Total Visits Paid</i>
<i>No. Visited</i>	<i>Total Visits</i>	<i>No. Visited</i>	<i>Total Visits</i>	<i>No. Visited</i>	<i>Total Visits</i>	<i>No. Visited</i>	<i>Total Visits</i>	<i>No. Visited</i>	<i>Total Visits</i>	<i>Routine Visits</i>	<i>Absentee or Dental Surveys</i>	
83	192	737	5509	471	5459	112	451	49	49	708	3,261	15,629

Last year it was pointed out that there was much more work to do than could be undertaken efficiently with the present number of Health Visitors and comparisons presented showed that the numbers locally were less than in other places. Unfortunately there has not so far been any increase in the numbers. The duties laid on the Health Visitors by the 1947 Act increased the scope of their work considerably and the need for an increase in the numbers becomes more apparent every day.

HOME NURSING.

513 patients were attended by a Home Nurse during 1953, and of this number 436 were attended for the first time. These figures show a steady increase over the last few years. 14,843 visits were paid. Brief particulars of the services rendered are appended :—

General Nursing Care...	...	...	...	...	...	...	117
Various forms of Dressings	...	...	...	...	...	...	88
Various forms of Enemata, Douches, etc.	...	...	...	...	...	...	84
Injections (mainly Penicillin)	...	...	...	...	...	...	147

No maternity cases were attended.

A list of the ailments from which these patients suffered is as follows :—

Inflammatory conditions	...	...	...	...	...	...	...	57
Cardiac conditions	...	...	...	...	...	...	...	39
Abdominal conditions	...	...	...	...	...	...	...	35
Senile weakness	...	...	...	...	...	...	...	26
Malignant disease	...	...	...	...	...	...	...	26
Respiratory conditions	...	...	...	...	...	...	...	23
Hemiplegia	...	...	...	...	...	...	...	22
Anaemia	...	...	...	...	...	...	...	15
Diabetes	...	...	...	...	...	...	...	9
Chronic nervous disorders	...	...	...	...	...	...	...	6
Fractures	...	...	...	...	...	...	...	5
Threadworms	...	...	...	...	...	...	...	3
Rheumatism	...	...	...	...	...	...	...	2
Tuberculosis	...	...	...	...	...	...	...	2
Kidney conditions	...	...	...	...	...	...	...	2
Measles	...	...	...	...	...	...	...	1
Other conditions	...	...	...	...	...	...	...	15

The age and sex of the 436 new patients are noted below :—

	<i>Under 10</i>	<i>11 to 20</i>	<i>21 to 30</i>	<i>31 to 40</i>	<i>41 to 50</i>	<i>51 to 60</i>	<i>61 to 70</i>	<i>71 to 80</i>	<i>81 to 90</i>	<i>Over 90</i>	<i>Total</i>
Male...	11	4	2	6	15	12	35	19	13	2	119
Female	12	15	40	20	18	55	60	74	23	—	317
Total...	23	19	42	26	33	67	95	93	36	2	436

DOMESTIC HELP.

This service has again fulfilled a very useful purpose. The majority of persons receiving help have been in the elderly and infirm category, but it has been possible to help a considerable number of those with sickness in the home.

At the end of the year there were 39 domestic helps employed—3 full-time, and 36 part-time. The helps have assisted in 126 homes, and the average period of assistance was 26 weeks. Thus a service which was conceived more or less as a method of tiding families over an emergency, has developed owing to the circumstances into a service of long term help. Each year the number of homes being assisted increases.

The following is a summary of the types of applicants for whom domestic helps were supplied :—

						Male.	Female.	Total.
Elderly and Infirm	...	...	...	...	...	9	56	65
Blind Persons	...	...	...	...	...	1	8	9
Tuberculous illness in household	...	...	...	...	...	1	—	1
Cases of other illnesses	...	...	...	...	...	—	40	40
Maternity —Mothers confined at home	...	...	...	...	...	—	7	11
—Mothers confined in hospital	...	...	...	...	...	—	4	

The amount paid in wages to domestic helps during the calendar year was £4,522 16s 10d, and the amount recovered over the same period was £1,598 12s 8d (approximately 35%).

VACCINATION AND IMMUNISATION.

Vaccination.

322 primary vaccinations and 118 re-vaccinations were carried out during the year.

The relative numbers vaccinated were :—

						Primary.	Re-vaccination.
(1) By Private Doctors	...	...	...	...	...	203	107
(2) At Local Authority Clinics	...	...	...	...	...	119	11

The vaccinal state of the community can be judged from the following figures :—

Children born 1st September, 1952—31st August, 1953.

Number registered as resident in Kilmarnock	...	...	...	...	...	665
Number alive at end of 1953	...	...	...	...	...	646
Number known to be vaccinated at 31st December, 1953	...	...	...	...	...	213
Percentage vaccinated	...	...	...	...	...	33%

(This is 4·5% higher than the figure for the previous 12 months).

<i>Year of Birth of Persons</i>	<i>Number of persons Primarily Vaccinated during Period</i>				<i>Number of Persons Re-Vaccinated during Period</i>				<i>Number of Persons Specially Reported during Period because of actual or Alleged Complication of Vaccination</i>
	<i>Typical Vaccinia Greatest at 7th-10th Day</i>	<i>Accelerated (Vaccinoid) Reaction 5th-7th Day</i>	<i>Reaction Greatest at 2nd-3rd Day</i>	<i>No Local Reaction</i>	<i>Typical Vaccinia Greatest at 7th-10th Day</i>	<i>Accelerated (Vaccinoid) Reaction 5th-7th Day</i>	<i>Reaction Greatest at 2nd-3rd Day</i>	<i>No Local Reaction</i>	
1953	181	—	—	4	—	—	—	—	—
1952	104	—	—	—	—	—	—	—	—
1951	8	—	—	—	—	—	—	—	—
1950	5	—	—	—	—	—	—	—	—
1949	1	—	—	—	—	—	—	—	—
1948	3	—	—	—	—	1	—	—	—
1947	—	—	—	—	—	—	—	—	—
1946	—	—	—	—	2	1	—	—	—
1945	—	—	—	—	—	1	—	—	—
1944	1	—	—	—	1	—	1	—	—
1943	1	—	—	—	—	—	—	—	—
1942	—	—	—	—	—	—	—	—	—
1941	—	—	—	—	—	1	1	—	—
1940	—	—	—	—	—	1	—	—	—
1939	—	—	—	—	—	—	—	—	—
1938 or earlier	14	—	—	—	23	36	32	16	—
	318	—	—	4	27	41	34	16	—

Immunisation—Diphtheria and Whooping Cough.

Although up till the end of the year combined antigens had not been used at the Health Department Clinics, they were popular and used to a considerable extent by certain general practitioners. In order to give a picture of the immunisation in the town the following tables have been drawn up :—

	<i>P.T.A.P.</i>		<i>Combined Antigens (Diphtheria and Whooping Cough).</i>	
	<i>Health Department Staff.</i>	<i>Private Doctors.</i>	<i>Health Department Staff.</i>	<i>Private Doctors.</i>
Immunisation completed	260	25	—	176
Immunisation incomplete	19	—	—	—
Boosting Injections	546	3	—	8
	825	28	—	184

	<i>No. of Schick Tests</i>	<i>Number Positive</i>	<i>No. of Retests</i>	<i>Number Positive</i>
At Clinics	115	1	1	—
At Schools	170	1	94	2
	285	2	95	2

To the above picture must be added the work carried on, mainly by the Health Department, in connection with separate immunisation against Whooping Cough. The number of children treated, together with their ages, is set forth below :—

<i>Age at Commencement.</i>	<i>Health Department Staff.</i>	<i>Private Doctor.</i>
Under 6 months	34	—
7-12 months	36	1
13-24 months	16	—
25 months and over	6	4

Following on information gained from personal contact with American programmes, the following application of studies to local conditions was decided on for 1954.

- For children presented by their mothers before the age of 6 months, 3 injections at monthly intervals of whooping cough suspended vaccine alone, to be followed at the age of 9 months, by 2 injections of combined diphtheria and tetanus antigens.
- For children presented by their mothers from the age of 6 months onwards, 3 injections of a triple vaccine of whooping cough, diphtheria and tetanus antigen.
- A further boosting injection of combined diphtheria and tetanus antigen at or about the time the child enters school.

The salient facts which led up to the adoption of adding the tetanus fraction to the combined antigens and producing active immunity rather than continuing the treatment of those who receive wounds with tetanus antitoxin, are set forth below :—

1. The number of wounds from accidents is considerable and the number from road accidents is increasing.
2. All such wounds, however trivial, are potentially dangerous.
3. The wound may be so slight that medical aid is not sought.
4. The administration of tetanus antitoxin is widespread, and each year, as a result of such administrations, many persons are sensitised to horse serum.
5. The results of the use of tetanus antitoxin are not dependable.
6. A considerable number of those who receive tetanus antitoxin suffer from severe general reactions and a few die of anaphylactic reactions.
7. Tetanus *toxoid* causes no reactions when given.
8. The experiences of the last war, when American and Canadian servicemen, already protected by *toxoid*, received further *toxoid only* when wounded, showed that this was a safe and reliable method of treatment, totally devoid of the dangers and drawbacks of the antitoxin method.
9. There is evidence to suggest that tetanus toxoid when given with diphtheria toxoid, tends to boost the efficiency of the latter.

PREVENTION, CARE AND AFTER-CARE—TUBERCULOSIS.

24 notifications in respect of Pulmonary Tuberculosis were received in 1953, and the diagnosis was confirmed in 22 cases. There were 10 notifications of the disease in non-pulmonary form, and 9 of these were confirmed.

The classification of the pulmonary notifications, according to Memo. TB/3/1947, was as follows :—

A.1 ...	...	...	...	...	2	B.1 ...	...	...	...	...	...	1
A.2 ...	...	...	...	...	2	B.2 ...	...	...	...	...	...	11
A.3 ...	...	...	...	...	1	B.3 ...	...	...	...	...	...	5

A—Patients from whom Tubercle bacilli have never been isolated.

B—Patients from whom Tubercle bacilli have been isolated.

1—Slight lung involvement (early case).

2—Moderate lung involvement (intermediate case).

3—Advanced lung involvement (late case).

The number of notifications each year is small and so is subject to many fluctuations due to chance causes. The number of notifications this year again shows a drop from the figure for 1952, and is only approximately half of the number for each of the preceding three years (1949-50-51). The percentage of the notifications falling into the B.3 category this year is 23. This figure is to be compared with the following table for past years :—

1949 ...	...	...	...	...	...	...	...	...	...	...	25%
1950 ...	...	...	...	...	...	...	...	...	...	...	21%
1951 ...	...	...	...	...	...	...	...	...	...	...	33%
1952 ...	...	...	...	...	...	...	...	...	...	...	13%

The nine confirmed notifications of non-pulmonary disease were in respect of :—

Meninges ...	...	...	...	...	...	...	...	...	...	6
Joints...	...	...	...	...	...	...	...	...	...	2
Glands ...	...	...	...	...	...	...	...	...	...	1

In only 5 of the 31 notifications was there a close family contact once each in the following :—a father, a brother, a niece, a brother-in-law, a son. On one occasion also, there was known exposure to infection at work.

The following table shows the number, by age groups, on the Tuberculosis Register. The number 247 shows a reduction of 52 over the previous year.

	<i>Under 1</i>	<i>1-5</i>	<i>5-10</i>	<i>10-15</i>	<i>15-25</i>	<i>25-35</i>	<i>35-45</i>	<i>45-65</i>	<i>65 and over.</i>	<i>All Ages.</i>
Respiratory Tuberculosis	1	4	4	7	53	81	41	17	1	209
Non-Respiratory Tuberculosis	—	2	6	5	15	5	2	2	1	38
	1	6	10	12	68	86	43	19	2	247

Contacts.—During the year 269 contacts came under review, *i.e.* an average of over 8 per notified case.

Mantoux Testing of Contacts (with 10 Units of Old Tuberculin).

	<i>Under 1.</i>		<i>1 and under 5.</i>		<i>5 and under 10.</i>		<i>10 and under 15.</i>		<i>15 and under 20.</i>		<i>20 and over.</i>		<i>Total.</i>	
	<i>M.</i>	<i>F.</i>	<i>M.</i>	<i>F.</i>	<i>M.</i>	<i>F.</i>	<i>M.</i>	<i>F.</i>	<i>M.</i>	<i>F.</i>	<i>M.</i>	<i>F.</i>	<i>M.</i>	<i>F.</i>
Positive	—	1	3	3	4	9	3	6	2	7	6	5	18	31
Negative.....	12	10	9	9	10	5	5	2	1	—	2	1	39	27
Total.....	12	11	12	12	14	14	8	8	3	7	8	6	57	58

This year 43% of contacts were positive reactors. This figure is to be compared with 39% in 1952 and 34% in 1951.

Housing of Tuberculous Families.

During 1953, eleven houses were allocated from the special allotment. In addition, seven families containing a patient suffering from tuberculosis were re-housed from the general list.

Extra Nourishment.

These arrangements were unchanged during the year. 5,813 pints of milk were provided at a cost of £167.

Provision of Articles for Use in the Home.

Articles such as beds, mattresses, blankets, sheets, pillow-cases, etc., were on loan to several families during the year.

B.C.G. Vaccination of Contacts.

63 contacts were vaccinated with B.C.G. The summary of testing and vaccination is appended in the table which follows:—

<i>Group.</i>	<i>Tuberculin Tested.</i>			<i>Negative Reactors.</i>			<i>Successfully Vaccinated.</i>		
	<i>M.</i>	<i>F.</i>	<i>Total.</i>	<i>M.</i>	<i>F.</i>	<i>Total.</i>	<i>M.</i>	<i>F.</i>	<i>Total.</i>
Contacts.....	57	58	115	39	27	66	38	25	63

In the case of one boy a revaccination was necessary before the Mantoux Test became positive. In addition to the above group, 7 new born children in tuberculous households were successfully vaccinated without a preliminary test.

**Routine Testing prior to B.C.G. 0.1 c.c. 1 : 1000 O.T.
Thirteen-year-old Group.**

1. PUBLIC RESPONSE : PARENTAL CONSENT TO TEST AND VACCINATION.

	Session 1952/53			Session 1953/54		
	<i>Pupils</i>	<i>Consents</i>	<i>Response</i>	<i>Pupils</i>	<i>Consents</i>	<i>Response</i>
Academy ...	242	179	73.9%	293	199	67.9%
Glencairn ...	71	53	74.6%	—	—	—
Grange ...	63	58	92.1%	52	39	75 %
James Hamilton	195	127	65.1%	148	93	62.8%
St. Joseph's High	125	91	72.8%	158	110	69.6%
Shortlees ...	—	—	—	102	56	54.9%
	696	508	72.9%	753	497	66 %

2. LOSS DUE TO ABSENCE OR PREVIOUS HISTORY.

	Session 1952/53			Session 1953/54		
	<i>Consents</i>	<i>Loss</i>	<i>Percentage</i>	<i>Consents</i>	<i>Loss</i>	<i>Percentage</i>
Academy ...	179	—	—	199	1	0.5
Glencairn ...	53	2	3.8	—	—	—
Grange ...	58	—	—	39	—	—
James Hamilton	127	1	0.78	93	2	2.2
St. Joseph's High	91	—	—	110	5	4.5
Shortlees ...	—	—	—	56	—	—
	508	3	0.59	497	8	1.61

3. RESULTS OF MANTOUX TESTS.

<i>Males</i>	Session 1952/53					Session 1953/54				
	<i>No. of Tests</i>	<i>Positive</i>	<i>%</i>	<i>Negative</i>	<i>%</i>	<i>No. of Tests</i>	<i>Positive</i>	<i>%</i>	<i>Negative</i>	<i>%</i>
Academy ...	87	32	36.8	55	63.2	97	41	42.3	56	57.5
Glencairn ...	22	9	40.9	13	59.1	—	—	—	—	—
Grange ...	34	17	50.0	17	50.0	23	7	30.4	16	69.6
Jas. Hamilton	63	28	44.4	35	55.5	46	24	52.2	22	47.8
St. Joseph's High ...	43	15	34.9	28	65.1	45	21	46.6	24	53.3
Shortlees ...	—	—	—	—	—	22	7	31.8	15	68.2
	249	101	40.6	148	59.4	233	100	42.9	133	57.1

<i>Females</i>	<i>No. of Tests</i>	<i>Positive</i>	<i>%</i>	<i>Negative</i>	<i>%</i>	<i>No. of Tests</i>	<i>Positive</i>	<i>%</i>	<i>Negative</i>	<i>%</i>
Academy ...	92	30	32.6	62	67.4	101	41	40.6	60	59.4
Glencairn ...	29	10	34.4	19	65.5	—	—	—	—	—
Grange ...	24	6	25.0	18	75.0	16	7	43.7	9	56.3
Jas. Hamilton	63	22	34.9	41	65.1	45	17	37.7	28	62.2
St. Joseph's										
High ...	48	16	33.3	32	66.6	60	24	40.0	36	60.0
Shortlees ...	—	—	—	—	—	34	14	41.2	20	58.8
	256	84	32.8	172	67.2	256	103	40.2	153	59.8

4. B.C.G. VACCINATIONS.

<i>Males</i>	<i>Session 1952/53</i>				<i>Session 1953/54</i>			
	<i>Negative Reactors</i>	<i>Not Vaccinated</i>		<i>Vaccinated</i>	<i>Negative Reactors</i>	<i>Not Vaccinated</i>		<i>Vaccinated</i>
		<i>Number</i>	<i>%</i>			<i>Number</i>	<i>%</i>	
Academy	55	—	—	55	56	1	1.8	55
Glencairn	13	—	—	13	—	—	—	—
Grange	17	—	—	17	16	—	—	16
James Hamilton	35	—	—	35	22	1	4.5	21
St. Joseph's High	28	—	—	28	24	1	4.2	23
Shortlees	—	—	—	—	15	—	—	15
	148	—	—	148	133	3	2.25	130

<i>Females</i>	<i>Negative Reactors</i>	<i>Not Vaccinated</i>		<i>Vaccinated</i>	<i>Negative Reactors</i>	<i>Not Vaccinated</i>		<i>Vaccinated</i>
		<i>Number</i>	<i>%</i>			<i>Number</i>	<i>%</i>	
Academy	62	—	—	62	60	—	—	60
Glencairn	19	—	—	19	—	—	—	—
Grange	18	—	—	18	9	—	—	9
James Hamilton	41	—	—	41	28	—	—	28
St. Joseph's High	32	—	—	32	36	—	—	36
Shortlees	—	—	—	—	20	—	—	20
	172	—	—	172	153	—	—	153

School Entrants are tested as a routine at medical examination by means of the jelly test. The jelly is applied to the front of the chest without any preliminary rubbing with sandpaper.

School	Number Tested			Number Positive		
	Male	Female	Total	Male	Female	Total
Bentinck	26	24	50	—	—	—
Glencairn	29	18	47	2	—	2
Grammar	30	32	62	1	2	3
Grange	33	40	73	—	2	2
High Street	18	20	38	3	—	3
Hillhead	29	37	66	1	3	4
Loanhead	36	32	68	—	—	—
Riccarton	7	7	14	—	—	—
St. Joseph's High	42	49	91	6	7	13
Shortlees	75	76	151	8	5	13
	325	335	660	21	19	40

X-Ray Diagnosis.

218 persons were referred by the Health Department for X-ray examination.

Mass Radiography.

As noted in last year's report the mobile mass miniature radiography unit returned to the town in January 1953 to complete the survey started in the Autumn. In January the following works were visited :—

Barr, Thomson & Co.
 Irvinebank Dyeworks
 Western S.M.T., Co., Ltd.
 John Walker & Sons
 Glacier Metal Co.

There were also sessions for the general public and the staffs of the Health and allied Departments.

In October the Unit returned and visited :—

Massey Harris Ltd.
 Crowley Russell
 Marks and Spencer.

There were also sessions for the general public and in addition the work of X-raying the group of school leavers prior to carrying out B.C.G. procedure was completed.

In all, 2,900 examinations took place.

Out-Patient Treatment.

Since 5th January, 1953, the Consultation Clinic premises in Kilmarnock Infirmary out-patient department have been in full service, and have saved the patients from this district much bus travel. It is again a pleasure to record the help received from the Tuberculosis Physician and his staff.

On most Saturday mornings a brief meeting is held between Dr. Hardie of the Tuberculosis Service, the Health Visitors, and a member of the Public Health Medical Staff and in this way some degree of co-ordination is maintained.

Home Visiting.

The Health Visitors continued home visiting during the year. 112 patients' homes were visited (34 were new patients) and a total of 451 visits were made.

Special Investigation—James Hamilton School.

It will be recollected that a school outbreak occurred in 1948. After those initially infected, a follow-up showed that all the other school contacts had escaped infection, until in 1952, one of the girls who had a primary infection in 1948, developed an acute exudative lesion and had to be admitted to hospital. She has since been discharged and is attending as an out-patient weekly for collapse therapy. At the end of the year she was expecting to start work in a month or two. All other contacts of the original trouble have remained well.

CONTROL OF INFECTIOUS DISEASES.

Number of Notifications (including those in respect of Tuberculosis) during 1953 ... 253

Average Number of Notifications received during the years 1948-1953... ... 221

The following table gives particulars of the main infectious diseases during the year :—

	<i>Under 1</i>	<i>1 and under 5</i>	<i>5 and under 15</i>	<i>15 and under 25</i>	<i>25 and under 35</i>	<i>35 and under 45</i>	<i>45 and under 65</i>	<i>65 and upwards</i>	<i>At all Ages.</i>
Cerebro-Spinal									
Fever.....	4	1	—	2	—	1	1	—	9
Dysentery.....	—	18	2	2	—	1	—	—	23
Erysipelas.....	—	—	—	—	1	1	1	—	3
Pneumonia, Acute									
Influenzal.....	—	—	—	—	2	—	1	2	5
Pneumonia.									
Other forms.....	9	8	6	2	4	9	11	15	64
Poliomyelitis.....	—	1	—	1	—	—	—	—	2
Scarlet Fever.....	1	32	51	3	—	—	—	—	87
Whooping Cough..	4	12	10	—	—	—	—	—	26
	18	72	69	10	7	12	14	17	219

1953 was a quiet year from the point of view of the notifiable infectious diseases. There were no epidemics or even localised outbreaks. For the fourth year in succession there was no case of diphtheria.

Non-Notifiable Infectious Diseases.

Chickenpox, Measles and German Measles were much more prevalent in 1953 than in the previous year.

Non-Notifiable Infectious Diseases during 1953.

	<i>Jan.</i>	<i>Feb.</i>	<i>Mar.</i>	<i>Apr.</i>	<i>May</i>	<i>June</i>	<i>July</i>	<i>Aug.</i>	<i>Sept.</i>	<i>Oct.</i>	<i>Nov.</i>	<i>Dec.</i>	<i>Total.</i>
Chickenpox.....	34	24	23	11	25	14	—	—	2	33	42	34	242
Measles.....	63	25	23	14	16	4	—	—	9	29	58	35	276
German Measles	15	24	56	22	27	16	2	—	1	6	5	2	176
Mumps.....	15	3	3	—	—	—	—	—	1	1	3	2	28
Impetigo.....	1	—	2	2	—	—	—	—	9	14	16	4	48
Scabies.....	—	—	—	—	—	—	—	—	—	—	—	—	—
Ringworm.....	—	1	—	—	—	—	—	—	2	1	—	3	7

Venereal Diseases.

There has again been a slight falling off in numbers during 1953.
Particulars of work done are to be found in the following tables.

Return of Cases Treated at Venereal Diseases Centres during 1953.

	Syphilis.		Gonorrhoea.		Venereal Conditions other than Syphilis and Gonorrhoea.		Total Venereal.		Non-Venereal.	
	Male.	Female.	Male.	Female.	Male.	Female.	Male.	Female.	Male.	Female.
Number of New Cases Attending...	6	10	8	—	—	—	14	10	26	13
Total Attendances of all Cases	374	448	138	—	—	—	512	448	123	29
Number of Patients admitted for Indoor Treatment	3	5	—	—	—	—	3	5	—	—
Number of Days' Residence	30	50	—	—	—	—	30	50	—	—

Age and Sex Distribution of New Cases during 1953.

Age Group.			Syphilis.		Gonorrhoea.		Venereal Conditions other than Syphilis and Gonorrhoea.		Total Venereal.		Non-Venereal.	
			Male.	Female.	Male.	Female.	Male.	Female.	Male.	Female.	Male.	Female.
Under 1 Year	...	...	—	—	—	—	—	—	—	—	1	1
1-4 Years	...	...	—	—	—	—	—	—	—	—	—	1
5-14 Years	...	...	—	1	—	—	—	—	—	1	1	3
15-24 Years	...	...	1	4	1	—	—	—	2	4	5	3
25-34 Years	...	...	1	1	4	—	—	—	5	1	13	5
35 and over	...	...	4	4	3	—	—	—	7	4	6	—
			6	10	8	—	—	—	14	10	26	13

MENTAL HEALTH.

The Psychiatric Out-patient Clinic at Kilmarnock Infirmary, set up last year, has continued to fulfil a great need. During the year 134 patients were seen and made a total of 454 attendances.

There is still no voluntary association for Mental Welfare in the town, but towards the end of the year a certain interest was evident in the possible resuscitation of such an association, which existed many years ago.

During 1953, 16 persons were examined under the Lunacy Acts. Of this number 12 were certified and admitted to Mental Hospitals.

The number of patients in Mental Hospitals under the Lunacy Acts on 31st December, 1954 was :—

	<i>Male</i>	<i>Female</i>	<i>Total</i>
Ayr District Mental Hospital	43	51	94
Bellsdyke Hospital	—	1	1
Stoneyetts	—	1	1
Cuninghame Home	2	5	7
Total	45	58	103

One female certified patient was under guardianship at home.

At the end of 1953 the following mentally defective persons were in Institutions :—

	<i>Male</i>	<i>Female</i>	<i>Total</i>
Cuninghame Home	6	—	6
Dunlop House	4	9	13
Waverley Park Institution	—	1	1
St. Charles Institution	—	2	2
Windsor Hospital	—	2	2
Larbert Institution	2	—	2
Kirklands Institution	—	1	1
Lennox Castle Institution	1	—	1
	13	15	28

The ages of the patients were :—

	<i>Male.</i>	<i>Female.</i>	<i>Total.</i>
Under 15 years	1	2	3
15-64 Years	12	13	25
65 Years and upwards	—	—	—
Total	13	15	28

In addition there was one male on licence and there were 4 males and 2 females under guardianship. Three new cases were ascertained during the year—one male and two females.

There is still an urgent need for the provision of further institutional care for mentally defective persons.

At the end of the year thought was still being given by the Education Department to the possibility of the provision of a training centre for those unfit to benefit by the education given at Park School and yet who were trainable.

WORK UNDER NURSERIES AND CHILD-MINDERS' REGULATION ACT.

No applications were received under this heading during the year.

SCHOOL HEALTH SERVICE.

School Medical Inspections and the conduct of Minor Ailments Clinics were carried out by the Burgh Health Staff by arrangement with the County Council. A full report of the work done is to be found in the Annual Report of the County Medical Officer.

During the year the following inspections took place :—

<i>Entrants.</i>	<i>Routine 9 Group.</i>	<i>Routine 12 Group.</i>	<i>Routine 15 Group.</i>	<i>Total.</i>	<i>Seven Years Vision Group.</i>	<i>Special Inspections.</i>	<i>Grand Total.</i>
758	708	705	101	2272	704	139	3115

Re-Examination of Children previously found Defective :—

Treatment Completed	...	...	...	...	...	...	...	...	10
Receiving Treatment	...	...	...	...	...	...	...	...	6
On Waiting List for Treatment	...	...	...	...	...	...	...	...	2
Condition Unchanged—Under Observation	...	...	...	...	...	...	...	...	4
Total	...	...	...	...	...	...	...	...	22

School Clinic.

<i>Month.</i>	<i>Number of Children Attended.</i>	<i>Number of Attendances.</i>
January.....	51	51
February.....	33	35
March.....	28	36
April.....	17	20
May.....	33	36
June.....	18	25
July.....	—	—
August.....	—	—
September.....	42	43
October.....	26	27
November.....	17	17
December.....	12	13
TOTAL.....	277	303

Eye Clinics.

<i>Number of Clinics held.</i>	<i>Number of Children Attended.</i>	<i>Number of Children who had Glasses Prescribed.</i>
45	466	294

FOOD SUPPLY.

Milk, Ice Cream, Meat and Other Foods, Food Poisoning.

For a detailed report on these subjects in the Burgh, reference should be made to the Report of the Chief Sanitary Inspector. It should be noted that Kilmarnock became a Specified Area in terms of the Milk (Special Designations) Act 1949, on 1st January, 1954. Thereafter the following grades of milk may be sold :—

1. Certified.
2. Tuberculin Tested.
3. Tuberculin Tested (Pasteurised).
4. Pasteurised.
5. Standard.

As from September, 1954 all licences to sell standard milk will expire.

WELFARE.

National Assistance Act.

The following table shows details of the provision made under Part III of the Act, and the accommodation taken up at the end of the year.

	<i>No. of places available</i>	<i>No. of persons admitted</i>		<i>No. in Residence December, 1953</i>			<i>Average Age of Adults</i>	
		<i>M.</i>	<i>F.</i>	<i>M.</i>	<i>F.</i>	<i>Children</i>	<i>M.</i>	<i>F.</i>
Springhill House ...	36	4	9	16	16	—	76	79
Mount House ...	36	10	10	10	10	—	77	79
Cuninghame Home	<i>Variable</i>	11	7	10	5	4	54	54
Nazareth House ...	<i>Variable</i>	3	—	4	3	—	80	66

Mount House, in pleasant country surroundings on the outskirts of the town, was opened in October 1953 by Provost Gilmour. It provides a very high standard of comfort for the residents. In addition to dormitories for 7 and 6, there are 5 rooms containing 3 beds, 2 containing 2 beds, and 4 single rooms. In addition there is ample sitting room accommodation.

Temporary Accommodation.

The scheme for emergency provision of accommodation for persons rendered homeless was reconsidered and adjusted during the year.

It will be recollected that in December 1952, following a fire at Davie's Mill, Soulis Street, 23 persons rendered temporarily homeless were accommodated in the Old High Church Hall. Of this number 13 were later taken in for the night by friends and relatives, and 10 slept in the hall. One child suffering from shock was admitted to Kilmarnock Infirmary.

A light meal was provided for 13 people.

Thanks are due to the Minister (Rev. D. Norman Masson) and office-bearers of the Old High Church for their help, so freely given, in this emergency.

In November and again in December, flooding took place in the region of the bridges at the lower end of Low Glencairn Street. On the second occasion some houses were also flooded in Bentinck Street.

In the November episode, two families were removed to Mount House, and on the second occasion 12 adults and 13 children from the caravan site in Academy Street and from two houses in Bentinck Street were accommodated and given a meal in the Riccarton Institute, New Street, for one night.

Welfare Services (Section 22).

A comprehensive scheme for the handicapped was still under consideration at the end of the year.

Removals (Section 47).

No such removal took place.

Care of Property (Section 48).

Under this Section, 5 houses were maintained for a time. In four instances the effects were eventually disposed of, and the remaining case was handed on to the family solicitor.

Burials (Section 50).

Seven burials were arranged by the Department.

HEALTH EDUCATION.

Talks were again given by members of the Health Department Staff to Church Guilds, Co-operative Guilds and other groups.

FACTORIES ACTS, 1937 and 1948.

Inspections.

<i>Premises.</i>	<i>Number on Register.</i>	<i>Number of</i>		
		<i>Inspections.</i>	<i>Written Notices.</i>	<i>Occupiers Prosecuted.</i>
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	62	9	—	—
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority ...	256	99	13	—
(iii) Other Premises in which Section 7 is enforced by the Local Authority (excluding Out-Workers' Premises) ...	10	—	—	—
TOTAL	328	108	13	—

Particulars of the Defects which were found.

Particulars.	Number of Cases in which Defects were found.				Number of Cases in which Prosecutions were Instituted.
	Found.	Remedied	Referred		
			To H.M. Inspector.	By H.M. Inspector.	
Want of Cleanliness	—	—	—	—	—
Overcrowding	—	—	—	—	—
Unreasonable Temperature ...	—	—	—	—	—
Inadequate Ventilation ...	—	—	—	—	—
Ineffective Drainage of Floors	—	—	—	—	—
Sanitary Conveniences—					
(a) Insufficient	—	—	—	—	—
(b) Unsuitable or Defective	9	9	—	2	—
(c) Not Separate for Sexes	—	—	—	—	—
Other Offences against the Act (not including Offences relating to Outwork) ...	—	—	—	—	—
TOTAL	9	9	—	2	—

